Generation With Promise: Year One Progress Report #1 (DUE: February 15, 2008)

| School: | Date: | | |
|---|---|---|-------------------------------|
| Person Completing Report: | Phone: | Email: | |
| Principal's signature if someone other than | principal completed repo | ort: | |
| This report covers the period from Novembreport to Barbara Blum, GWP Project Mana (blumb@michigan.gov), faxed to 313 456-4 Suite 3-350, 3056 W. Grand Blvd., Detroit, contact Barbara Blum at the Generation Wi | ager, by February 15th, 2 1379 or mailed to the Offi MI 48202. If you need as | 008. It can be sent as an emaice of the Surgeon General, Cassistance completing this report | l attachment dillac Place, |
| 1. Development of Required Teams | | | |
| Provided with this report (Attachment A) are during this phase of the project. These form a. Coordinated School Health Team b. Community Mentor Team Roster c. Student Action Team Roster | ns must be completed an m Roster | | |
| It is understood that members will be added planned activities. You will be expected to | • | | • |
| What difficulties did you encounter during the | he process of forming the | ese teams? | |
| What recommendations would you have for • | r others, as they go throu | igh the process of forming thes | e teams? |

2. Healthy School Action Tool and Action Plan

Your Coordinated School Health Team (CSHT) needs to complete the Healthy School Action Tool (HSAT) with the assistance of the project evaluation consultant and/or the local project coordinator. Following completion of the HSAT, the team needs to complete an Action Plan (provided when the HSAT is completed). Please attach the completed Action Plan to this report; it will need to be updated and submitted with each progress report.

What difficulties did you encounter during the completion of the HSAT? Or Action Plan??

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What recommendations would you have for others, as they go through the process of completing the HSAT or the related Action Plan.

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3. Progress Update

Please provide a brief update for each of these areas. It is anticipated that you will make more progress in some areas than others, during a single reporting period.

| ,,, | | areas than strong, adming a single reporting period. |
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| | a. | Development of new health-related policies (if policies have been written, please attach to this report): • |
| | | • |
| | b. | Implementation or promotion of existing health-related policies: |
| | | • |
| | c. | Progress in any of these areas: |
| | | Healthy eating (school meals, vending, a la carte, school stores, fundraising, concessions, foods served at school events such as open houses or conferences or classroom parties or celebrations): • |
| | | • |
| | | Nutrition education for your students: |
| | | • |
| | | Physical education or opportunities for physical activity: • |
| | | • |
| | | 24-7 tobacco-free campus or tobacco education: • |
| | | • |
| | | Leadership development of students related to health policy or the school environment: • |
| | | • |
| | | Professional Development (health or PE teachers or any staff participation in training related to the goals of this project): • |
| | | • |

4. Project Evaluation

- a. What has occurred in your project that you are most proud of?
- b. What has been the most difficult part of this grant project so far?
- c. Is the assistance provided by your local project coordinator valuable? sufficient? appropriate? timely? Any suggestions for how their support could be improved or modified to be more helpful?
- d. Do you have any concerns that you would like to share with the project leadership team?
- e. Dr. Wisdom and her staff are interested in any successes you can share that demonstrate the value of this project (please share successes that were not reported earlier in this document).

5. Documents

In addition to the completed team rosters and your HSAT Action Plan, please attach any school or district newsletters or other communications with parents/guardians, the school board or others that share information about your grant project. List documents attached here:

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6. Other Feedback

This is your chance to brag, complain, or share anything that wasn't covered in this report with us.

Progress Report #2 will be **due May 15, 2008** and cover the time period from February 1 – April 30, 2008. The reporting form will be provided to you in January. Progress Report #3 will be **due July 30** and cover the period of May 1 -June 30th. In August you will be provided with a summary (brag sheet) of your accomplishments that we encourage you to share with your school board in September. You will also be provided with a highlight sheet summarizing data and successes of ALL ten schools combined.

This project is funded by a generous grant from the W.K. Kellogg Foundation of Battle Creek, Michigan to the Michigan Department of Community Health (MDCH), under the direction of the Michigan Surgeon General Kimberlydawn Wisdom, M.D., M.S. **For more information** about **Generation With Promise**, contact Barbara Blum, GWP Project Manager, Office of the Surgeon General (Phone: 313 456-4382 or blumb@michigan.gov).